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Arkansas Health Counts

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Fetal Alcohol Syndrome, drinking moms rare here, but...

Fetal alcohol syndrome: A GROUP OF PHYSICAL AND MENTAL DEFICITS THAT OCCUR AMONG SOME CHILDREN BORN TO MOTHERS WHO DRANK HEAVILY WHILE PREGNANT. THESE DEFICITS INCLUDE FACIAL ABNORMALITIES, GROWTH RETARDATION, AND BEHAVIORAL AND COGNITIVE PROBLEMS.

If you're pregnant and drinking alcohol, you may be messing your baby up bad. It can't be said any plainer than that. There is no known safe amount of alcohol consumption during pregnancy, and women who are pregnant or who are planning a pregnancy should avoid alcohol, period. Children of mothers who drink heavily during pregnancy can be born with facial abnormalities and with behavioral and learning problems. Collectively, these deficits are called fetal alcohol syndrome.

The fetus seems most vulnerable to alcohol and drugs during the first trimester, before many young mothers realize they are pregnant.

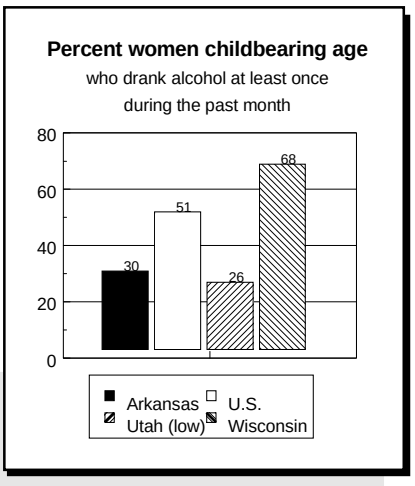
Crack babies get the headlines, but 5,000 to 10,000 U.S. babies are born each year with fetal alcohol syndrome (FAS), a similar, more common threat, according to a report published in the *Harvard Mental Health Letter*.

Fetal alcohol syndrome (FAS) may occur in almost one in every 1,000 births nationwide, and may be the most common of the known, preventable causes of mental retardation.

Four-fold increase

Nationally, frequent alcohol consumption among pregnant women increased four-fold between 1991 and 1995. That's according to CDC researchers, who analyzed data from the Behavioral Risk Factor Surveillance System (BRFSS), a random telephone survey of the adult population in each state. When asked if they had had a drink of any alcoholic beverage (beer, wine, or liquor) during the past month, almost one in six pregnant women nationwide responded that they had, and over 3 percent of pregnant women reported drinking frequently (seven or more drinks per week or five or more alcoholic beverages on at least one occasion).

In Arkansas in 1995, 30 percent of women of childbearing age drank at least one alcoholic



Inside:

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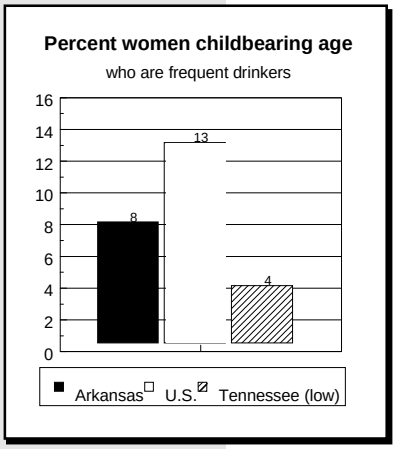
beverage during the past month, compared to 51 percent nationwide.

Arkansas was ranked 47th in the prevalence of drinking reported by women of childbearing age, with Utah reporting the lowest prevalence (26 percent) and Wisconsin the highest (68 percent).



Approximately 143,150 women of childbearing age in Arkansas drink alcohol.

In Arkansas, 8 percent of such women reported drinking frequently, ranking 42nd among the states. The nationwide prevalence was 13 percent.

Wisconsin also reported the highest prevalence of frequent drinking among women of childbearing ages. Tennessee had the lowest prevalence (4 percent). Approximately 35,810 women of childbearing age in Arkansas frequently drink alcohol. Deformities include small eyes, drooping eyelids, short, upturned noses with low bridges, flat cheeks, bulging foreheads, and a large space between the nose and the mouth. FAS children are short and thin, with very small heads. Many have small brains, deformed hearts, kidneys, and urinary tracts, abnormal spines, undescended testicles, undeveloped fingerprints, and many other physical defects.

Preventable retardation

More serious intellectual and emotional problems include mental retardation.

"People who care for them are especially struck by their poor judgment and inability to appreciate the consequences of their actions," according to the *Harvard Mental Health Letter*. They have trouble learning from experience, ignore warnings, lack gratitude, fail to grasp moral issues and need even simple directions repeated hundreds of times. They may require special education, vocational training, physical, occupational, and speech therapy, medical treatment and other services, often at taxpayer expense.

The damage produced by prenatal alcohol exposure may depend on several factors. Early exposure increases the risk for serious physical defects, and later exposure increases the chances of growth deficiencies. The brain is quite sensitive to alcohol and neurological impairment can occur throughout pregnancy.

Alcohol consumption increases the risk of first and second trimester miscarriages.

In the third trimester drinking may impair growth and brain development.

FAS is entirely preventable; however, the medical and public health communities struggle to eliminate this birth defect 25 years after it was first identified.

The costs

The economic costs associated with FAS, including neonatal care, surgery, special education, and supervised care for the mentally retarded, are estimated to be from $250 million to over $1 billion per year.

One of the goals of the Healthy People 2000 National Health Promotion and Disease Prevention Objectives is to increase the percentage of women who abstain from alcohol during pregnancy to 95 percent by the year 2000. In 1995, 84 percent of pregnant women surveyed for the BRFSS reported no alcohol consumption, indicating that considerable progress remains to be made if we are to reach the goal.

Alcohol in a pregnant woman's bloodstream crosses the placenta to the fetus. There, the alcohol interferes with the ability of the fetus to receive sufficient oxygen and nourishment for normal cell development in the brain and other body organs.

Fetal alcohol syndrome, the most common *known* cause of mental retardation, except maybe Down syndrome, may account for 8 percent of mild mental retardation and 10 percent of the cost of institutionalizing the mentally retarded.

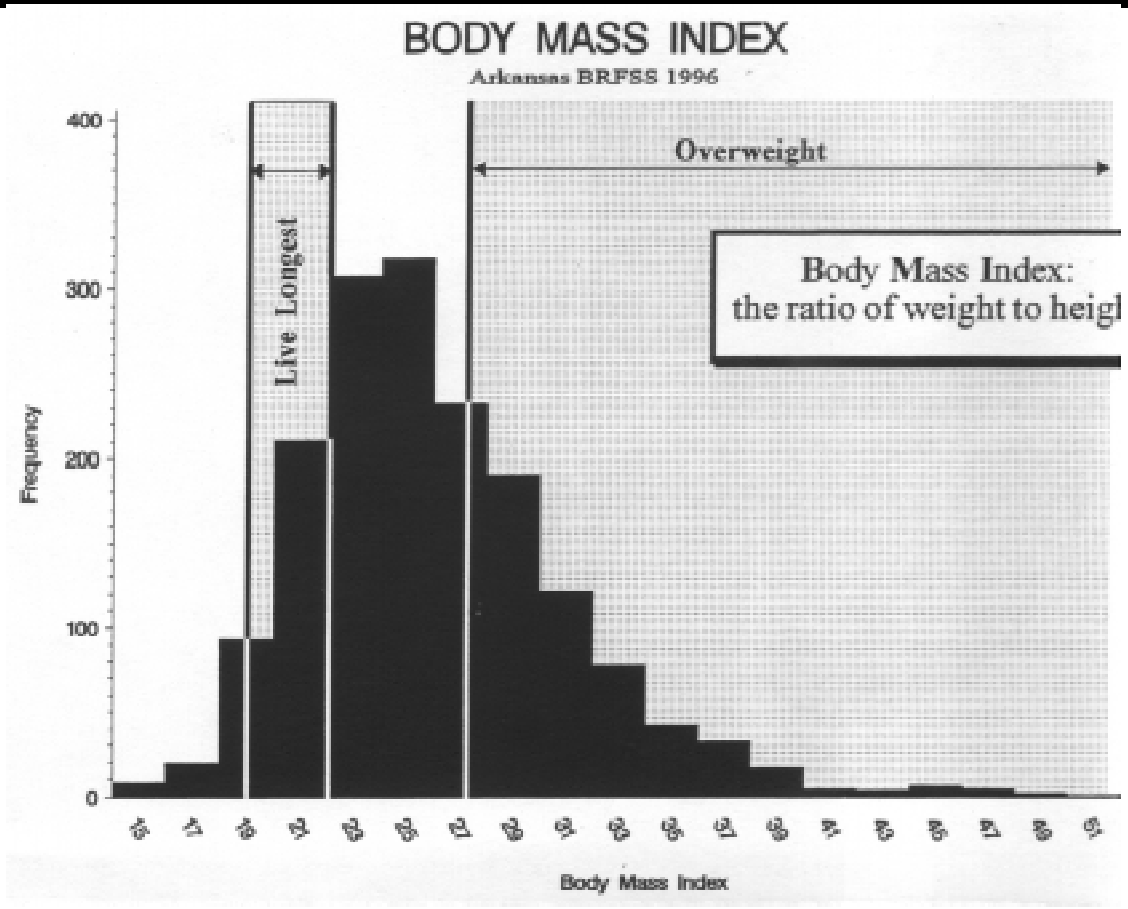
Approximately 35,810 women of childbearing age in Arkansas frequently drink alcohol.

Child abuse

Several states and the Navajo Indians classify heavy drinking or drug use during pregnancy as child abuse.

An estimated 30 to 45 percent of women taking six drinks a day throughout pregnancy will give birth to a child with fully developed FAS.

For high-risk, poorly educated women, get the low-literacy brochure, “Drinking and Your Pregnancy” from the National Institute on Alcohol Abuse and Alcoholism (P.O. Box 34445, Washington, DC, 20043) or download and reproduce it from the National Council on Alcoholism and Drug Dependence web site (http://www.ncadd.org/arbdwk.html).



Weigh less, live longer

16 percent of Arkansans qualify

by Jyotin Vyas, program analyst
Arkansas Center for Health Statistics

Thinner is better at virtually every age, according to the results of one of the biggest studies ever to look at the effects of weight on longevity. The study reviewed American Cancer Society data collected on 324,135 men and women in 1960 and in 1972. The results were published in the January 1 issue of the *New England Journal of Medicine*.

The study found people who live longest have body mass indexes (BMI) between 19 and 22, which is quite thin, about equal to--or a little less than--the 1983 Metropolitan Life Insurance ideal weight table. Only about 16 percent of Arkansans qualify.

The Centers for Disease Control and Prevention considers 22-23 the ideal BMI.

BMIs greater than or equal to 27.3 for females and 27.8 for males are considered overweight. Thus, 34 percent of men and 27 percent of women in Arkansas are overweight and at risk.

National surveys show that 59 percent of men and 49 percent women have BMIs greater than 25. A 5-foot-4, 118 pound woman has BMI of 20; at 145 pounds she has a BMI of 25; at 175 pounds she has a BMI of 30.

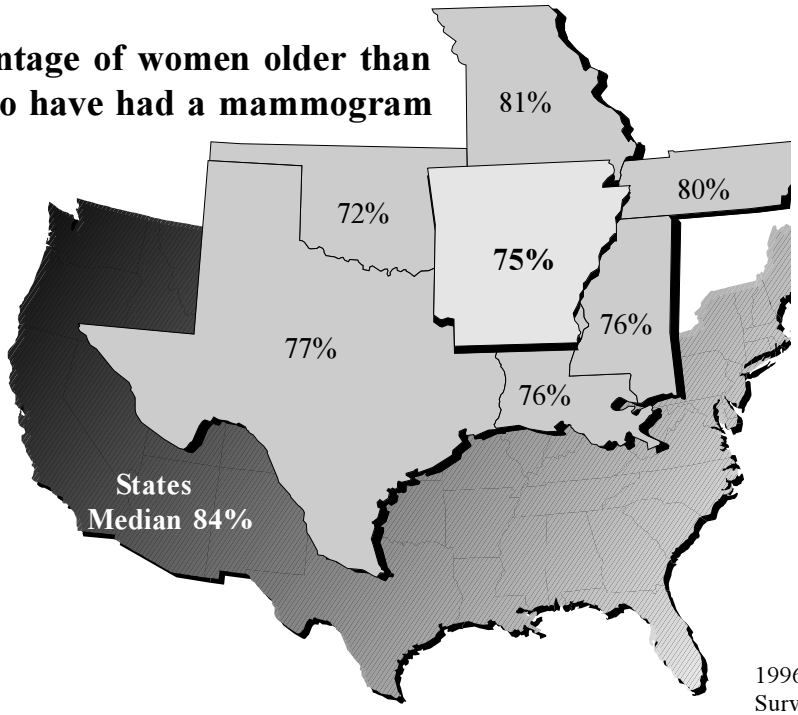
BMI is becoming the standard because it allows the fatness of people with different heights to be compared.

Compute your own BMI

1. Get a calculator
2. Divide your weight in pounds by 2.2 (example 185/2.2=84)
3. Divide your height in inches by 39.37 (example 72/39.37=1.83)
4. Square the last number (example 1.83*1.83=3.35)
5. Divide #2 by #4. (example 84/3.35=25.1=BMI)

Arkansas at a glance

Percentage of women older than 40 who have had a mammogram



1996 Behavioral Risk Factor Surveillance System Survey

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